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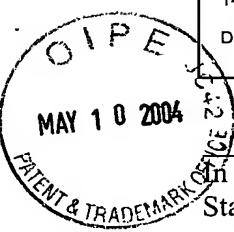
Dated: 5/10/04

Signature: Andrea Silverman

(Andrea Silverman)

Docket No.: WIBL-P01-575
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



In re Patent Application of:
Stacey Bolk et al.

Application No.: 10/007781

Filed: November 13, 2001

For: ASSOCIATION OF THROMBOSPONDIN
POLYMORPHISMS WITH VASCULAR
DISEASE

Confirmation No. 1826

Art Unit: 1634

Examiner: Sitton, J.S.

AMENDMENT AFTER FINAL ACTION (37 C.F.R. SECTION 1.116)

MS AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This Amendment is being filed in response to the Office Action mailed from the U.S. Patent and Trademark Office on January 8, 2004 in the above-identified application. The Office Action sets forth a three month period to file a response. Applicants have filed concurrently herewith a Notice of Appeal and a Petition for a one month extension of time. Accordingly, the time to file a response has been extended to May 8, 2004, and this response is being timely filed. Reconsideration and further examination are requested.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.



AMENDMENT TRANSMITTAL LETTER					Docket No. WIBL-P01-575	
Application No. 10/007781		Filing Date November 13, 2001		Examiner J. S. Sitton		Art Unit 1634
Applicant(s): Stacey Bolk et al.						
Invention: ASSOCIATION OF THROMBOSPONDIN POLYMORPHISMS WITH VASCULAR DISEASE						
TO THE COMMISSIONER FOR PATENTS						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		
Total Claims	20	- 21 =	0	x 18	0.00	
Independent Claims	4	- 5 =	0	x 86	0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						
Other fee (please specify):						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00	
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity						
<input checked="" type="checkbox"/> No additional fee is required for this amendment.						
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.						
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.						
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.						
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>18-1945</u> as described below. A duplicate copy of this sheet is enclosed.						
<input type="checkbox"/> Credit any overpayment.						
<input type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.						
<i>Gloria Fuentes</i> Gloria Fuentes Attorney Reg. No.: 47,580						
ROPES & GRAY LLP 45 Rockefeller Plaza New York, New York 10111-0087 (212) 497-3624						
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Dated: <u>5/10/04</u>		Signature: <u>Andrea Silverman</u> (Andrea Silverman)				